Combined Declaration	For Patent A	application a	nd Power of Attorney		ATTOR 83469F	NEY DOCKET
As below named inve My residence, post office addres I believe I am the original, first a of the subject matter which is cla A METHOD FOR U	entor, I hereby declar is and citizenship are and sole inventor (if aimed and for which	re that: e as stated below n only one name is l a patent is sought	ext to my name, isted below) or an original, first: on the invention entitled:		tor (if plural name	es are listed below)
IMAGES IN INFOL	MAGING					
The specification of which (chec	ak only one item bel	ow):				
X is attached hereto.						
was filed as United Sta	tes Application Se	rial No. on and				
was amended on (if ap	plicable).					
			d was amended on (if applicat			
	ed and understand f	he contents of the	above-identified specification, in	cluding the cla	ims, as amended l	y any amendment
referred to above.  I acknowledge the duty to discl-	ose to the U.S. Pate	nt & Trademark O	ffice all information known to m	ne to be materi	al to patentability	as defined in Title
37, Code of Federal Regulations	s, §1.56.					
I hereby claim foreign priority by certificate, or (365 (a) of any PC	enefits under Title T international app	35, United States lication(s) which d	Code, §119 (a)-*d) or 365 (b) o lesignates at least one country of	t any toreign a her than the U	nited States of An	nerica, listed below
and have also identified below	any foreign applica	tions(s) for patent	or inventor's certificate or any I	CT internation	nal application(s)	designating a least
one country other than the Units priority is claimed:	d States of America	a filed by me on th	e same subject matter having a f	filing date befo	re that of the appl	ication(s) of which
PRIOR FOREIGN/PCT APPI	LICATION(S) AND	ANY PRIORITY	CLAIMS UNDER 35 U.S.C.	119:		
COUNTRY (# PCT, industr PCT)	APT	RUCATION NUMBER	DATE OF FILMS (methologyan)		PRORITY CLAMED	
proj, nazaroj					YSS	NO NO
					YES	NO NO
I hereby claim the benefit under	r Title 35, United St	ates Code, 119 §(	e) of any United States provision	al application(	s) listed below:	
			Y CLAIMS UNDER 35 U.S.C.			
PROVISIONAL	APPLICATION NUMBER			FILING CLATE (month)	hylyse)	
the United States of America th prior applications(s) in the mar Office all information known	at is/are listed below nner provided by the to me to be materis	w and, insofar as tl e first paragraph o il to patentability	f any prior United States applicates subject matter of each of the cf Title 35, §112, I acknowledge as defined in Title 37, Code of PCT international filing date of the	laims of this a the duty to dis Federal Regul	pplication is not d sclose to the U.S. lations §1.56, wh	isclosed in that/thos Patent & Trademark
PRIOR US APPLICATIONS 35USC§120:	OR PCT INTERN	ATIONAL APPL	ICATIONS DESIGNATING TH	IE U.S FOR I	BENEFIT UNDE	R
	U S APPLI	ICATIONS			STATUS (Check	
U.S. APPLICATION NUMBER		U.S. FILING DATE		PATENTED	PENDING	ABANDONED
				i		
	PCT APPLICATIONS DI	ESIGNATING THE U	3			
PCT APPLICATION NO	PCT FILI	NG DATE	U.S. SERIAL NUMBERS ASSIGNED (if any)			

Combined Declaration For Patent Application and Power of Attorney (Continued)	ATTORNEY DOCKET

POWER OF ATTORNEY: As a named inventor, I hereby appoint the attorney(s) and/or agent(s) associated with Eastman Kodak Company Customer No. 01333 to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Send Correspondence to:  Patent Legal Staff				(name and telephone number)	
Eastman Kodak Company				Peyton C. Watkins	
343 State Street Rochester, NY 14650-2201			(716) 477-8282		
			Y 14650-2201	FAX: (716) 477-4646	
. 1	FULL NAME OF	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME M.	
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2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
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3	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)	
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
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4	BUSINESS ACCEPESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)	
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
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5	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)	
2	FULL NAME OF INJENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
0	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
6	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)	
		that all statements made homin of my o	own knowledge are true and that all statement	s made on information and belief are believed to	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application or any patent issue thereon.

SIGNATURE OF INVENTOR 201 Thomas M. Kephany	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203					
DATE 10/9/0/	10/9/01	DATE					
SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206					
DATE	DATE	DATE					